

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/591819.

FILING DATE

12 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		1		/		
3		2		/		
4		2		/		
5		0		/		
6		0		/		
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40	/		/			
41		1		/		
42		1		/		
43		1		/		
44		3		/		
45		1		/		
46		1		/		
47		1		/		
48		1		/		
49						
50						
TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	50	←	30	←		←
TOTAL CLAIMS	52		22			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						